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## APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\* *None* *PMC*\*\* FOREIGN APPLICATIONS \*\*\*\*\* *None* *PMC*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no		
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance		
Verified and Acknowledged	<i>mc</i>		
Examiner's Signature	Initials		
STATE OR	SHEETS	TOTAL	INDEPENDENT
COUNTRY JAPAN	DRAWING 4	CLAIMS 4	CLAIMS 1

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## TITLE

Testing apparatus

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue )
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